

MULTIPLE DEPENDENT CLAIM
FEE CALCULATION SHEET
(FOR USE WITH FORM PTO-875)

SERIAL NO.

101599338

FILING DATE

09-26-08

APPLICANT(S)

CLAIMS

	AS FILED		AFTER 1 ST AMENDMENT		AFTER 2 ND AMENDMENT	
	IND.	DEP.	IND.	DEP.	IND.	DEP.
1	1		1	1		
2		1		1		
3	1		1			
4	3		1			
5	3					
6	3		1			
7	0		1			
8	1		1			
9	1		1			
10	1		1			
11	6		1			
12	1	1	1			
13	1	1	1			
14	1	1	1			
15	1	1	1			
16	1	1	1			
17	1	1	1			
18		1	1			
19		1	1			
20	3		1			
21	3		1			
22	3		1			
23	1		1			
24	1					
25	1		1			
26	1		1			
27	1	1	1			
28	1	1	1			
29	1	1	1			
30	0		1			
31	1		1			
32	2					
33	2					
34	2					
35	2					
36	2					
37	2					
38	2					
39	2					
40	2					
41	1					
42						
43						
44						
45						
46						
47						
48						
49						
50						
TOTAL IND.	3		2			
TOTAL DEP.	59	←	37	←		
TOTAL CLAIMS	62		29			

	AS FILED		AFTER 1 ST AMENDMENT		AFTER 2 ND AMENDMENT	
	IND.	DEP.	IND.	DEP.	IND.	DEP.
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TOTAL IND.						
TOTAL DEP.						
TOTAL CLAIMS						